

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Human Rights Campaign Equality Votes	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00508440 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 02 / 29 / 2016</div> </div>	

Full Name of Payee Human Rights Campaign		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 02 / 29 / 2016</div>	
Mailing Address 1640 Rhode Island Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">587.50</div>	
City Washington	State DC		
Purpose of Expenditure Video Production - staff time (nationally disseminated video)		Category/ Type	Transaction ID : D623237 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 02 / 29 / 2016</div>
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1175.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Human Rights Campaign		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 02 / 29 / 2016</div>	
Mailing Address 1640 Rhode Island Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">195.83</div>	
City Washington	State DC		
Purpose of Expenditure Video Production - staff time (nationally disseminated video)		Category/ Type	Transaction ID : D623238 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY 02 / 29 / 2016</div>
Name of Federal Candidate Rafael Edward Cruz		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">1175.00</div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">783.33</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

[Electronically Filed]

Date

MM / DD / YYYY
03 / 02 / 2016

Signature

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
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Form/Schedule: F24A

Transaction ID :

Amending original report, FEC-1052687, in order to reflect correct billing rate for staff time.

Form/Schedule:

Transaction ID:

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Human Rights Campaign Equality Votes	FEC IDENTIFICATION NUMBER ▼ C C00508440
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on	
<div style="display: flex; justify-content: space-around;"> MM / DD / YYYY 02 / 29 / 2016 </div>	

Full Name of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 195.83	
City Washington	State DC	Zip Code 20036	Transaction ID : D623239
Purpose of Expenditure Video Production - staff time (nationally disseminated video)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 29 / 2016
Name of Federal Candidate Marco Rubio		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		1175.00	

Full Name of Payee Human Rights Campaign		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 195.84	
City Washington	State DC	Zip Code 20036	Transaction ID : D623240
Purpose of Expenditure Video Production - staff time (nationally disseminated video)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 29 / 2016
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		1175.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	391.67
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1175.00

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Mr. James Rinefierd

[Electronically Filed]

Date

MM / DD / YYYY
03 / 02 / 2016

Signature